

Uganda



Country Focus Areas

- Supporting the generation of evidence for the feasibility or potential of a series of tax-financed health trust funds in raising revenue for the health sector (including sin taxes and motor vehicle insurance taxes), in order to increase the public budget for health.
- Improve the quality and efficiency of health facilities through results-based financing, and increase access to services through demand-side vouchers.
- Expand access to a package of high-impact RMNCAH interventions by level, with a focus on high burden populations and the 40 highest burden districts.
- Improve the community-based services and functionality of health centers, in order to provide good-quality maternal, neonatal and child health services.
- Increase district-level capacity to drive improvements in RMNCAH outcomes and service provider capacity by establishing skills hubs.
- Address the broader context for health outcomes by focusing on the social determinants of health for adolescents.
- Scale up birth and death registration services at the health facility and community levels, and develop and disseminate a strategy and communication strategy for civil registration and vital statistics.

RMNCAH-N Core Indicators

Maternal mortality ratio: **336 per 100,000 live births**

Neonatal mortality ratio: **27 per 1,000 live births**

Under-five mortality ratio: **64 per 1,000 live births**

Adolescent birth rate: **132 per 1,000 women**

Percent of births <24 months after the preceding birth: **24.3%**

Stunting among children under 5 years of age: **28.9%**

Moderate to severe wasting among children under 5 years of age: **3.4%**

Health Financing Core Indicators

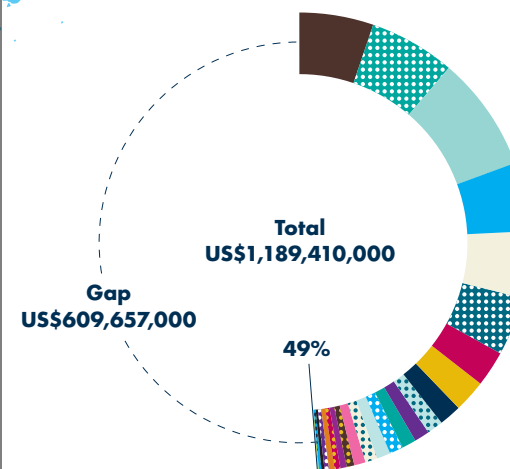
Health expenditure per capita financed from domestic sources: **US\$6.23**

Ratio of government health expenditure to total government expenditures: **5.14%**

Percent of current health expenditures on primary/outpatient health care: **58.26%**

Incidence of catastrophic and impoverishing health expenditures: **15.27% catastrophic**
3.18% impoverishing

Resource Mapping



- GOVERNMENT
- WORLD BANK
- UNFPA
- UNICEF
- DFID
- USAID
- GAVI
- WORLD VISION UGANDA
- GFATM
- SIDA
- SAVE THE CHILDREN UGANDA
- AECID
- MARIE STOPES UGANDA
- MALARIA CONSORTIUM
- KOICA
- AMREF
- BTC/ENABLE
- LIVING GOODS
- ISLAMIC DEV BANK
- CHAI
- JICA
- PSI
- JHPEIGO
- UPMB
- WHO
- GAP

Uganda's resource map covers FY 2018 to 2021, including more than 26 aligned donors to the IC. However, a 51% gap in financing the 5-year IC remains. Uganda's government budget accounts for approximately 10% of the overall available financing for the IC.

Monitoring the Country-Led Process

Area	Score 1	Score 2	Score 3
INVESTMENT CASE	Investment case for RMNCAH-N or equivalent (e.g., national healthplan)	Investment Case in development	Investment Case complete
	Set of evidence based priorities financed	Not prioritized within available funding	Priorities determined, but financial gap remains
	Results monitoring strategy and framework in support of IC*	Not developed	Developed and initial assessment of results monitoring capacity available
COUNTRY PLATFORM	Country-led multi-stakeholder platform (e.g., new or established from an existing platform)	Not yet established	Established and initial meeting held
	Government focal point	Government focal point not yet identified	Government focal point identified
	An inclusive country platform process with CSO engagement	CSOs not included in the process	CSO representative identified
HEALTH FINANCING	Health financing reforms identified	Not considered at this time	Developed but not integrated in IC
	World Bank-funded project in support of the IC	Project under preparation	Project approved and available online
	Private sector engagement	Private sector engagement not identified at this time	Country has either included or identified a private sector intervention
OTHER AREAS OF INTEREST	Civil registration and vital statistics (CRVS) made a priority	CRVS not identified as priority	CRVS identified as a priority in the investment case
	Management of medicines and supplies / supply chain interventions	Supply chain / commodity management not identified as a priority	Supply chain / commodity management identified as a priority

* Both included in the IC document or a separate document
 ** Meaning that funding was allocated, disbursed and released – payment done
 *** ANC4 = four antenatal care visits
 ART = antiretroviral therapy; ARV = antiretroviral; DTP3 = vaccination for Diphtheria, Tetanus, and Pertussis; ORS = oral rehydration solution; PMICT = prevention of mother-to-child transmission; PNC = postnatal care.